INTRODUCING THE 1991 HOSPITAL OF THE YEAR
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MEMO FROM THE EDITOR

A celebration from the start

When the first issue of VETERINARY ECONOMICS appeared in 1960, I was 8 months old. Kathy and Katie, the managing and associate editors, were barely twinkles in their parents' eyes. As the three of us flipped back through the pages and the years to research this commemorative issue, we learned a great deal about what we're doing today—and why. For example, to paraphrase the very first issue of the magazine, dated October 1960, the purpose of VETERINARY ECONOMICS was as follows:

- To bring you business information designed to meet your specific needs—information not previously available to veterinarians.
- To give you information on new developments in business management, taxes, finance, office management, office procedures, and any other business activities of special interest to veterinarians.
- To study the records of successful veterinarians to discover what led to their success, and to publish the results of those studies in detail so that all veterinarians can benefit.

It is a testimony to the founding editors that, despite the shifts and swings of the economy, and the ever-changing face of the profession, those editorial goals remain unchanged today. In this issue, we celebrate another facet of the magazine that hasn't changed: a dedication to studying, tracking, and improving veterinary hospital design.

Design articles burst on the scene in 1965 and have guided—and been guided by—the hospitals built ever since. For 25 years, the point has been made that design is not a flourish but a critical management tool. Done well, design facilitates the movement of staff, clients, patients, resources, and revenue; done poorly, it impedes progress and wastes both time and money.

This month's special section is brought to you by Managing Editor Kathy Lumetta, under whose watchful eye the hospital design functions of the magazine continue today. She is in charge of the articles, the conference, and the competition; in this issue, she presents an enlightening look at the past, present, and future of hospital design. Her purpose is the same as the magazine's: to reflect where you've been, to analyze where you are, to anticipate where you're going, and, of course, to help you get there. I hope you enjoy the journey.

Becky Turner

Rebecca R. Turner

veterinary economics

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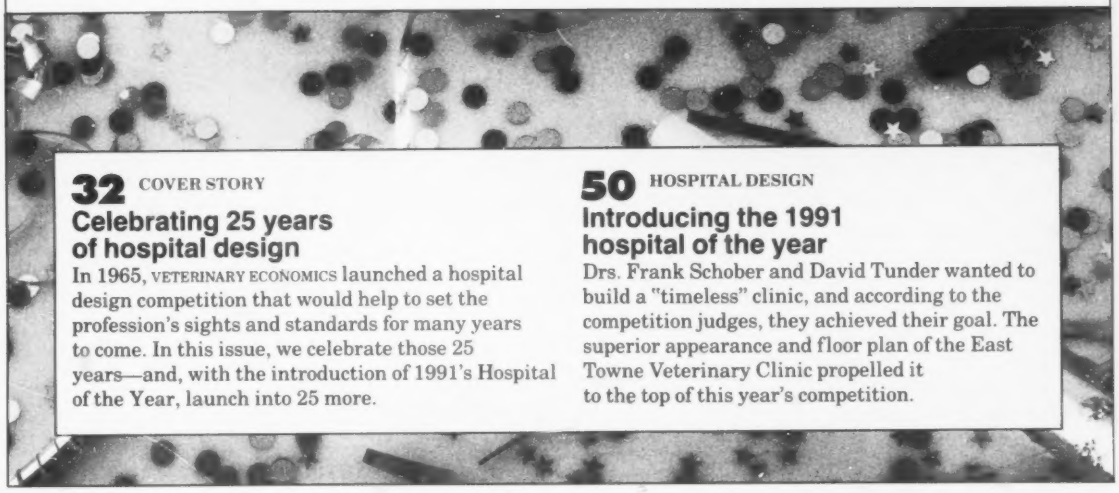

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clinic. As their facility needs changed, Dr. Schober began compiling ideas for a new hospital.

"I had worked in and visited many practices, so I took pieces I liked and started putting together a traffic-flow pattern, centering around a treatment area," he says. Both he and Dr. Tunder wanted their design to provide efficient staff movement between the receptionist, lab/pharmacy, and treatment areas. "We believe that receptionists are vital to the success of the practice," Dr. Schober says. "They have to be comfortable to do their jobs."

The practitioners set their sights on property one mile from their leasehold practice. "A business associate of ours told us of a study done by the Trammel Crow company," Dr. Schober says. "The study found that this is one of the most rapidly developing commercial corridors in the country." The doctors say they don't regret paying the property's premium price, because a high traffic count, a nearby tennis club, and a multitheater complex give them prime exposure.

Benefits outweigh costs

The doctors placed priority on benefit over cost in many areas of the construction. "We took a lot of time before we jumped into the project, but I think a plus for us was that cost was not our number-one concern," Dr. Schober says. "We talked to many veterinarians who had cut costs to begin with, only to regret it later. So we didn't want to limit ourselves based on

High ceilings, natural lighting, and fluorescent and track lighting provide a spacious waiting area. The Du Pont Corian reception desk (below) features an engraving of the clinic logo and brass rails that serve as a hitch for animals. A Corian work-top behind the main desk allows staff members to complete tasks yet still maintain client contact.

INTRODUCING THE 1991 HOSPITAL OF THE YEAR

Drs. Frank Schober and David Tunder wanted to build a "timeless" clinic, and according to the competition judges, they achieved their goal. A long-wearing appearance and a well-integrated floor plan propelled the East Towne Veterinary Clinic to the top of this year's competition.

By Catherine C. Lumetta MANAGING EDITOR

HOSPITAL OF THE YEAR

The doctors at the East Towne Veterinary Clinic, in Mequon, Wis., worked toward a design that would complement their residential location for years to come. The clinic maintains two entrances, one for hospital services, and another for such ancillary services as grooming, boarding, and pet supplies.

When Drs. Frank Schober and David Tunder approached Architect William Copich, they told him they wanted their hospital to be "timeless." It must, they stipulated, fit in now—and in the future—with the appearance of the surrounding residential neighborhood.

The doctors believe they achieved their goal, and the judges of the 1991 Hospital Design Competition confirmed their claim. In fact, the timeless construction of the East Towne Veterinary Clinic, in Mequon, Wis., weighed heavily in the judges' decision to proclaim the facility the 1991 Hospital of the Year. "This facility will wear well," said one judge. "It will age better because it is a more conservative design."

The judges also noted how well the design meets the contemporary needs of the veterinary profession. For example, they agreed that the 9,988-square-foot facility provides an efficient, harmonious relationship between medical and ancillary services.

Common philosophies, goals

Drs. Schober and Tunder, 1982 graduates of Purdue and Ohio State, respectively, met through a local veterinary association. "We found that our practice philosophy and our personalities matched so well, we decided to join forces," Dr. Schober says. The doctors opened a leasehold practice in 1986, but quickly outgrew the

ENTRIES COME FROM FAR AND WIDE

The map above shows the number of design competition entries from each state. The winners—whose states are shaded on the map—are listed below. Each will be featured in an upcoming issue.

1991 Hospital of the Year
East Towne Veterinary Clinic
Mequon, Wis.
Small animal freestanding
9,988 square feet

1991 Runner-Up
Countryside Veterinary Hospital
Chelmsford, Mass.
Small animal freestanding
5,881 square feet

1991 Merit Awards

Animal Eye Clinic
Portland, Ore.
Small animal freestanding*
2,200 square feet

Chesapeake Animal Hospital
Chesapeake, Va.
Small animal freestanding
6,477 square feet

Far West Companion Animal Hospital
Austin, Texas
Small animal conversion
3,200 square feet

Hôpital Vétérinaire Daubigny
Quebec, Canada
Small animal freestanding
8,740 square feet

Johnson Veterinary Services
Bernardsville, N.J.
Small animal home clinic
1,096 square feet

Moulton Animal Hospital
Laguna Hills, Calif.
Small animal leasehold
1,400 square feet

*Practice is mixed animal, facility is small animal

cost; we knew we'd be here a long time and wanted our hospital to be pleasant for us and our staff. I think it's going to pay off in the long run as far as durability."

To finance their clinic, the doctors shopped around. Of the six banks they approached, three expressed interest in their project. They chose Park Bank, a small Milwaukee bank that specializes in serving small businesses, for its "exceptional service and attitude." The bank agreed to write the entire loan, but the doctors obtained more favorable rates with two additional backers: the Wisconsin Business Development Fund (an SBA program) and family members.

THE GOING RATE FOR NEW HOSPITALS

In 1965, construction costs for the Hospital of the Year totaled $54,250, or $24 a square foot. Ten years into the competition, the average cost for all construction types was $136,298—or $35 a square foot.

Today, veterinarians are paying 39 percent more to construct new facilities than they paid in 1985,[1] when the average cost per square foot for all construction types was $47, and the average total cost was $173,668. Below are cost figures for the last two years.

Clinic type	Average construction costs[2]	Average cost per. sq. ft.
Freestanding	$417,945	$ 71
	288,921	70
Leasehold	109,400	49
	64,150	27
Additions/alterations	209,297	43
	336,074	37
Conversion	185,000	42
	275,833	62
Home clinic	175,000	160
	*	*
All projects	332,495	65
	255,773	59

☐ 1991 entries ☐ 1990 entries

[1]As reported in March 1986
[2]Figures compiled from VETERINARY ECONOMICS' Hospital Design Competition entries from 1990 and 1991. Land and equipment costs not included.
*Not applicable.

Quality, comfortable design

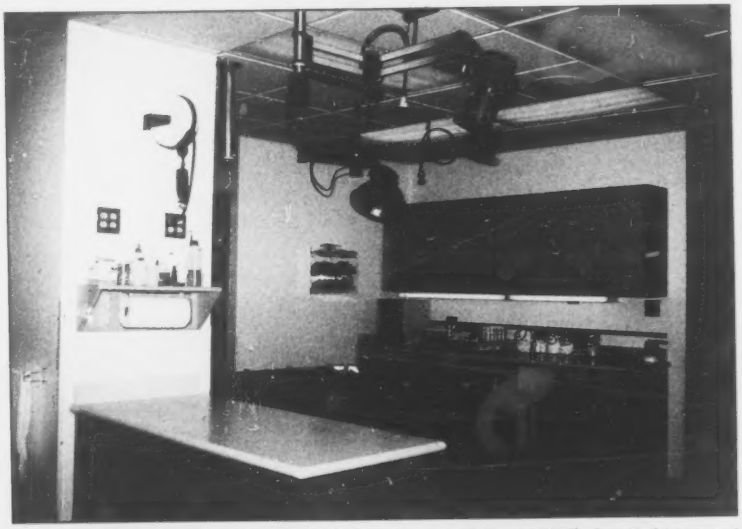
The doctors say they were careful to create a design that mirrors their practice philosophy. "We strive to be a high-quality, low-volume practice with 30-minute appointments that emphasize client education and preventive health care," they wrote in their entry form. "We feel it important that the public be made aware that veterinarians spend as much time—and more money—than other health-care professionals to continue providing the best care available. This facility reflects our commitment to excellence in the pet health-care field."

In keeping with their practice philosophy, the doctors opted for separate entrances for medical and ancillary services. They also included an obedience-training room in the basement. "We lease the space to a dog trainer, who uses it five days a week," Dr. Schober says. "It's a mutually beneficial arrangement; we recommend people to her, and vice versa."

"Training is so important," he continues, "especially when you think about the number of animals euthanized for behavior problems."

The doctors' choice of materials also illustrates their commitment

Larger exam rooms feature rheostat switches so that lights can be dimmed when treating frightened animals and exotic species. Rounded edges on the Corian-topped exam tables help prevent pets from grabbing the ends and jumping off. Public-area floors are quarry tile, as is the lab/pharmacy floor.



The need for a support column dictated the layout of the centrally located treament room. The L-shaped wet-and-dry workbench utilizes the column for electrical wiring and plumbing. The treatment room includes a hydraulic lift table and mobile crash cart to make it easier to move large animals.

to quality pet care. For example, all counter tops and exam-table tops are Du Pont Corian, as are both reception desks. The doctors say the material's durability and rich look overruled its high price—3½ times more than the cost of Formica.

"I wouldn't have it any other way, despite the cost," Dr. Schober says, "because every client who comes in and puts an animal on it has commented that the animal seems much more calm. It simply provides a warmer look."

The doctor's also chose solid oak for chairs, doors, trim, shelving in the client areas, and the ceiling in the waiting area. In all animal areas, Florock coved 4 inches up the wall provides easy cleaning and better traction for the animal. "The Florock was twice as expensive as sheet vinyl, but we think it was well worth it," Dr. Schober says. "It's an epoxy material troweled on over concrete and coated with a sand finish."

The doctors also spared no expense for cages and runs. Although they paid $1,500 apiece for 32 Suburban Surgical runs, Dr. Schober says "you can't beat them. Their maintenance is next to nothing." He adds that clients appreciate the cages because they keep their animals off the cold floor and out of their own excrement. In addition, clients like the piped-in music that soothes their pets in the animal quarters.

To help them win over the zoning commission, the doctors committed to 100-percent indoor runs,

and a well-designed plan for noise and odor control. Special sound-absorbing concrete blocks enclose the animal quarters, and ceilings are acoustic tile backed with sound batts. Solid-core oak doors with door sweeps also reduce sound transmission.

"We thoroughly researched the Soundblox concrete block, because we were worried that they would trap odor and moisture," Dr. Schober explains. "But the company we bought it from has used it extensively in similar situ-

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HOSPITAL DESIGN RISES TO MEET NEW CHALLENGES

As the two-day hospital design competition progressed last January, one thing became clear: The judges are paying more attention to the nontraditional entries.

"We've evolved to a point that we can say the design and scope of general practice facilities has become pretty standard," says judge Jim Rosenberger, DVM, of Cleveland, Ohio. "While veterinarians should stick with what works, we judges must start recognizing the differences in the way practices operate today."

For example, among this year's entries the judges encountered a home clinic and a specialty hospital. Although both of these practice types have been entered in previous competitions, the judges agree that this year's examples are the best they've seen; in fact, both received Merit Awards. "We're awarding these out-of-the-ordinary practices because we believe they will become more common in the future as a result of changes in the profession, and veterinarians will need a place to start for floor-plan designs," Dr. Rosenberger says.

Joining Dr. Rosenberger in the judging were Dr. Ross Clark and Architect Jim Marshall, both veteran design-competition judges, and Architect Wayne Usiak, new to the competition but an experienced designer of and lecturer on animal-care facilities. In general, the judges say that hospital design may be more important now than ever due to a stronger emphasis on marketing, as well as the economics of owning a veterinary hospital.

"I think what's happening is that more veterinarians are taking a business approach," Dr. Rosenberger says. "I believe this is a function of today's economic condition; more veterinarians today feel they have to be businesspeople first, and veterinarians second, if they are to survive.

"In design, that means we're seeing more extremes. For example, we're seeing more leased facilities, which is probably a function of location and of cost restrictions. On the other hand, we're also seeing megabuck, owner-developed leasehold projects."

Of the overall quality of the competition entries, Architect Marshall concludes: "There are so many regular, well-designed, professional clinics, that most of them, unfortunately, don't stand out of the pack to be given awards. Five years ago these clinics would have been the delightful exception; now they are the rule. The exception these days are those hospitals that go a step beyond."

WHO ENTERED WHAT?

The 41 entries in this year's competition included:

Construction type	Number of entries
New freestanding	27
Leasehold	5
Additions and alterations	6
Conversions	2
Home clinic	1

Practice type	Number of entries
Small animal	30
Mixed animal	11*

*Only five of the 11 mixed animal practices were designed to treat large animals in-hospital.

ations, and they assured us it would be no problem. It hasn't been so far, and the noise reduction is phenomenal."

Last, but far from least

The doctors might describe their success as phenomenal as well. "We've doubled our staff since opening the door," Dr. Schober says, "and our business has grown 44 percent." Dr. Schober is quick to add, however, that their success can't be attributed solely to the new building.

"Both Dr. Tunder and I feel that it's the quality of the people and the medicine in our practice that keeps our clients coming back. We haven't changed our fee structure since opening the new practice; our fees are based on the quality of medicine we provide, not on the cost of our building.

"I think that's where practitioners have to come around; they have to recognize that it's our knowledge and time that clients pay for. I don't care if you have a million-dollar practice; if you don't have a caring staff, a caring attitude, and a commitment to medicine, clients won't come back."

WANT TO ENTER?

Applications are now available for the 1992 Hospital Design Competition. To enter your hospital, request an application by writing:

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